

Entered - 07/23/01 - sb
CL01L0465 - DIANNE C. MITCHELL

CLAIM OF: C. DALE HARMAN
615 Tuxedo Place, NW
Atlanta, Georgia 30342

01- *R*-1248

For damages alleged to have been sustained as a result of payment of
Stormwater Utility Tax on January 22, 1999 for property at 615
Tuxedo Place, NW.

THIS ADVERSED REPORT IS APPROVED

Standing committees
AGENDA

BY: *Rosalind Rubens Newell*
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

Regular
Report
Removed from consent
by *Muller & Norris* 9/4/01

ADOPTED BY *motion to approve as*
SEP 04 2001 *Amended*
COUNCIL *by voice vote*
unanimously

ADVERSE REPORT

PUBLIC SAFETY &

LEGAL ADMINISTRATION COMMITTEE

DATE: SEP 04 2001

CHAIR: *C. T. Martin*

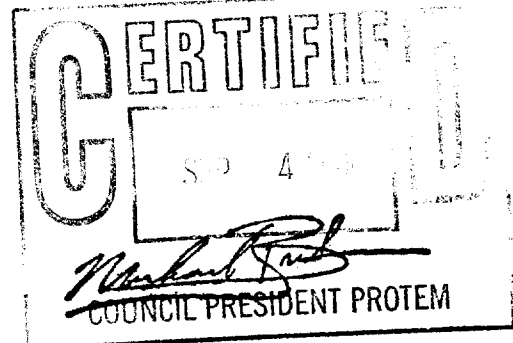
Cynthia

Chela Hankins

APPROVED

SEP 13 2001

WITHOUT SIGNATURE
BY OPERATION OF LAW



CERTIFIED
SEP 04 2001

[Signature]
DEPUTY MUNICIPAL CLERK



**MUNICIPAL CLERK
ATLANTA, GEORGIA**

01-R-1248

A RESOLUTION

**BY PUBLIC SAFETY &
LEGAL ADMINISTRATION COMMITTEE**

BE IT RESOLVED BY the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **C. Dale Harman** in the sum of **\$119.90** in full settlement and satisfaction of all claims, past, present and future, of every kind and character, for damages alleged to have been sustained as a result of a **payment of Stormwater Utility Tax on January 22, 1999 for property at 615 Tuxedo Place, NW** as is more particularly set forth in the within claim; said sum taken from and charged to Account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

A true copy,

Rhonda Dauphin Johnson
Municipal Clerk, CMC

ADOPTED as amended by the Council
RETURNED WITHOUT SIGNATURE OF THE MAYOR
APPROVED as per City Charter Section 2-403

SEP 04, 2001

SEP 13, 2001

COUNCIL FLOOR AMENDMENT

Tuesday, September 04, 2001

BY: COUNCILMEMBER CLAIR MULLER

RESOLUTION 01-R-1248

Delete existing language and substitute in lieu thereof:

Therefore be it resolved that the City Attorney be and his hereby authorized to conclude settlement of all claims against the City of Atlanta filed by C. Dale Harman arising from payment of a Storm Water Utility Fee on or about January 22, 1999.

Be it further resolved that the Chief Financial Officer is authorized to pay a total of \$119.90 to C. Dale Harman to be charged to and paid from 1AO1 529017 T31001.

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0465

Date: August 1, 2001

Claimant /Victim C. DALE HARMAN

BY: (Atty)(Ins. Co.) _____

Address: 615 Tuxedo Place, NW, Atlanta, Georgia 30342

Subrogation: _____ Claim for Property damage \$ 119.90 Bodily Injury \$ _____

Date of Notice: 07/16/01 Method: Written, proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 01/22/99 Place: 615 Tuxedo Place, NW

Department Finance Division: Treasury

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: The claimant is seeking repayment for the stormwater utility tax that he paid pursuant to City Code Section 154-316. A lawsuit was filed against the City by the Fulton County Taxpayers Association and a settlement agreement was reached. Pursuant to that agreement the City was ordered to repay those who had paid this tax. The City mailed checks to persons whom its records showed as having paid the tax and seventy thousand checks were mailed out beginning February, 2000 and, after allowing time for the checks to be processed or returned, the City next placed an advertisement in the Atlanta Journal and Constitution. This advertisement notified those who had paid the tax but had not received a check, the procedures for applying for a refund. The terms of the settlement agreement directed that all claims for refunds had to be received by December 31, 2000, this information was also published in the advertisement. The claimant failed to meet the deadline applying for his refund and has been advised of the reasons for the same.

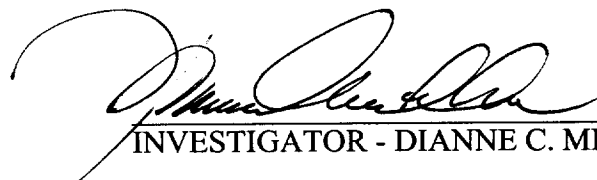
INVESTIGATION:

Statements: City employee _____ Claimant _____ Others X Written _____ Oral X
Pictures _____ Diagrams _____ Reports: Police _____ Dept Report _____ Other _____
Traffic citations issued: City Driver _____ Claimant Driver _____
Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental _____ Ministerial _____
Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable _____
City not involved X Offer rejected _____ Compromise settlement _____
Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____
Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,



INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____
Claims Manager: [Signature] Concur/date 08-01-01
Committee Action: _____ Council Action _____

COUNCIL OF THE CITY OF ATLANTA
CLERK OF COUNCIL
City Hall/Suite 2700
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RECEIVED

JUL 16 2001

MUNICIPAL CLERK

RE: CLAIM FOR DAMAGES

TODAY'S DATE: 12 July '01

M. Mitchell
07/20/01
Ph

Dear Sir:

This is to notify the City of Atlanta that I have suffered damages in the sum of \$ 119.90 property and/or \$ _____ bodily injury for which I contend the City is liable.

ENTERED - 7-23-01 - SB
01L0465 - DIANNE MITCHELL

1. Date of incident: _____ (month day year)
2. Police called: _____ (Yes) (No)
3. Location of incident: _____
4. Name of your insurance company _____ Policy # _____

5. State what and how incident occurred: I did not receive a refund after paying the Storm Water Utility Tax that was found illegal by the court. I am attaching correspondence and proof of payment. I will appreciate your consideration in re-imbursing me. Thank you.
(Use other side if necessary)

6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE STATEMENTS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

7. The registered owner must make the claim for vehicle damages. Complete the following and attach two (2) estimates of repair.

Your vehicle: _____
(make) (year) (tag#) (driver's name)

City vehicle: _____
(make) (driver's name) (department)

8. Witness: _____
(name) (address) (phone)

9. The acknowledgment of this claim in no way waives the Governmental Immunity of the City of Atlanta, as granted by State Law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT!

10. THIS CLAIM SHOULD BE MAILED IMMEDIATELY TO THE ADDRESS SHOWN ABOVE.

C. Dale Harman (SEAL)
(claimant)
615 Tubelo Rd. N.W.
(address)
Atlanta Ga 30342
(city) (state) (zip)
404 231-9656 404 231-3946
(home) (phone) (work)

01-R-1248